
ADDIS ABABA UNIVERSITY
COLLEGE OF HEALTH SCIENCE DEPARTMENT OF EMERGENCY AND
CRITICAL CARE MEDICINE



A DESCRIPTIVE CROSS SECTIONAL STUDY ON JOB SATISFACTION AMONG
EMERGENCY DEPARTMENT STAFF WORKING IN ADDIS ABABA
UNIVERSITY TIKUR ANBESSA SPECIALIZED HOSPITAL, ADDIS ABABA
ETHIOPIA, 2019

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August 2019

Addis Ababa, Ethiopia

DECLARATION

I, the undersigned, declare that this is my original work and that all sources of materials used for this thesis are duly acknowledged.

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ABSTRACT

Background: Job satisfaction is the degree to which employees have a positive affective orientation towards employment by an organization. By studying job satisfaction, it is possible to understand the current facts and present constructive solutions for any solvable problem.

Objective: To assess job satisfaction among nurses, residents and emergency physicians and to analyze the relationship of job satisfaction with demographic and professional characteristics in adult emergency department, Tikur Anbessa Hospital, Addis Ababa, Ethiopia during the time of April 1, 2019 to July 30, 2019

Methodology: we performed a descriptive, cross-sectional study in an ED in Tikur Anbessa Specialized Hospital. Job satisfaction was evaluated by means of the Modified Font-Roja questionnaire. Multivariate analysis determined relationship between the overall job satisfaction and the variables collected.

Results: Fifty-four nurses, 25 residents and 5 Emergency physicians were included. Residents are more satisfied than nurses and specialists 3.31 ± 1 Vs 3.36 ± 1 ($p < 0.05$) and 3.34 ± 1 ($p = 0.41$) respectively. Multivariate analysis showed the following variables to be associated with overall job satisfaction: educational level : (OR 2.33 [95% CI 0.462–4.19]; $p < 0.032$), distance from home (OR 0.422 [95% CI 0.213–0.631]; $p < 0.046$) and monthly income (OR 0.79 [95% CI 0.25–1.33]; $p < 0.012$).

Conclusions: The findings of this study highlight that job satisfaction of ED healthcare professionals as a whole is low, being nurse, long distance from the hospital and low monthly income are factors associated with low job satisfaction. Conversely, interpersonal relationships are identified as strength.

Contents

ACKNOWLEDGMENT.....	IV
ABSTRACT.....	V
LIST OF TABLES.....	VIII
LIST OF FIGURES.....	IX
LIST OF ABBREVIATIONS.....	X
CHAPTER ONE: INTRODUCTION.....	1
1.1 BACKGROUND.....	1
1.2 STATEMENT OF THE PROBLEM.....	2
1.3 SIGNIFICANCE OF THE STUDY.....	2
1.4 OBJECTIVES OF THE STUDY.....	3
1.4.1 GENERAL OBJECTIVES:.....	3
1.4.2 SPECIFIC OBJECTIVES.....	3
CHAPTER TWO: LITERATURE REVIEW.....	4
CHAPTER THREE: METHODS.....	6
3.1 STUDY AREA AND PERIOD.....	6
3.2 STUDY DESIGN.....	6
3.3 POPULATION.....	6
3.3.1 SOURCE POPULATION.....	6
3.3.2 STUDY POPULATION.....	6
3.4 INCLUSION AND EXCLUSION CRITERIA.....	6
3.4.1 INCLUSION CRITERIA.....	6
3.4.2 EXCLUSION CRITERIA.....	6
3.5 STUDY VARIABLES.....	7
3.5.1 INDEPENDENT VARIABLES:.....	7
3.5.1 DEPENDENT VARIABLES:.....	7
3.6 SAMPLE SIZE AND SAMPLING.....	7
3.7 DATA COLLECTION PROCESS AND MEASUREMENT.....	7
3.7.1 PERMISSION TO PROCEED.....	7
3.7.2 OPERATIONAL DEFINITION.....	7
3.7.3 DATA COLLECTION.....	7
3.7.4 DATA QUALITY CONTROL.....	8
3.7.5 DATA ANALYSIS.....	8
3.8 DISSEMINATION OF THE RESULT.....	8
CHAPTER FOUR: RESULTS.....	9
CHAPTER FIVE: DISCUSSION.....	14
CHAPTER SIX.....	16
6 LIMITATIONS, CONCLUSION AND RECOMMENDATION.....	16
6.1 LIMITATIONS.....	16
6.2 CONCLUSION.....	16
6.3 RECOMMENDATIONS.....	16
REFERECES.....	18

ANNEXES	20
ANNEX I	20
INFORMED CONSENT	20
ANNEX II	21
QUESTIONNAIR.....	21

LIST OF TABLES

Table1 Baseline demographic and professional variables, at TASH ED from April to July 2019

Table2 Comparison of demographic and professional variables, at TASH ED from April to July 2019

Table3 Comparing the overall job satisfaction among the three study groups at TASH ED from April to July 2019.

Table 4Shows variables associated with overall job satisfaction at TASH ED from April to July 2019

LISTOF FIGURS

Figure1 Shows the percent of participant's job satisfaction, at TASH ED from April to July 2019.

Figure2 shows the level of job satisfaction, at TASH ED from April to July 2019.

LIST OF ABBREVIATIONS

1. AaBET---Addis Ababa Burn, Emergency and Trauma Hospital
2. CPR---Cardiopulmonary Resuscitation
3. ED---Emergency Department
4. SPSS---Statistical Package for Social Sciences
5. TASH---Tikur Anbessa Specialized Hospital

CHAPTER ONE: INTRODUCTION

1.1 BACKGROUND:

Job satisfaction is the degree to which employees have a positive affective orientation towards employment by an organization. Job satisfaction has been conceptualized both globally (general satisfaction with a job) and dimensionally (satisfaction with specific dimensions of a job such as remuneration, promotion, and relationships with colleagues). Job satisfaction in Emergency department(ED) is of interest because it is an important determinant of the performance of health professionals. Job satisfaction has been linked to health worker motivation, stress, burnout, absenteeism, intention to leave and turnover. (1)

In 1976 job satisfaction was defined as “a pleasurable or positive emotional state resulting from the appraisal of one’s job or job experiences”.(2) From a management perspective, job satisfaction is believed to be a key factor that influences performance of individuals and organizations, and is closely related to the quality of the services provided (3).

Although job satisfaction research has been carried out for decades, no recent overview of job satisfaction instruments and their quality is available (4). The evidence from researches points to specific determinants and correlations of job satisfaction and productivity. Dissatisfaction with one’s job may result in higher employee turnover, absenteeism, slowness and grievances. On the other hand, improved job satisfaction is results of increased productivity. (5)

Therefore, Job satisfaction among healthprofessionals is increasingly being recognized as a measure that should be included in quality improvement programs. Whereas, low job satisfaction can result in increased staff turnover and absenteeism, which affects the efficiency of health services. (6).

Medical practice in the emergency department (ED) involves the management of diagnostic and therapeutic uncertainties within generally stressful and sometimes even hostile setting. In addition, the frequent overcrowding that occurs in hospital EDs, and the scarcity of resources lead to notable physical and mental distress of the healthcare workers, and may produce professional burnout and work dissatisfaction(7). However, no previous studies have been performed comparing the level of job satisfaction among different healthcare providers, such as physicians, nurses and Residentsstaff, in an ED in Ethiopia.

1.2 STATEMENT OF THE PROBLEM

It is known that job satisfaction is key element that is closely related to the quality of the healthcare service provided, in Africa generally and in Ethiopia specifically, where resources are scares, frequent overcrowding, unsafe work place the job dissatisfaction is expected to be more worse, even though this is fact, there is no research done to identify the magnitude of the problem and its impact on the service quality.

This study particularly focused on comparing level of job satisfaction among nurses, residents and emergency physicians working in Tikur Anbessa Adult emergency department.

This is the first study in our country to evaluate and compare the grade of job satisfaction among the different professional groups in an ED.

1.3 SIGNIFICANCE OF THE STUDY

Hospital personnel have difficulties in meeting the needs of their patients if their own needs are not met; therefore, hospital managers have responsibilities to both staff and patients.

Job satisfaction is an important determinant of the quality of healthcare provided, in resource limited countries like Ethiopian the level of job dissatisfaction and its reflection on the healthcare quality is expected to be high. Employees can directly influence patient satisfaction because of their direct involvement and interaction with patients.

Job satisfaction is currently considered to be a measure that should be included in quality improvement programs. In health care organizations, it is very essential to determine factors associated with job satisfaction since this will ensure the provision of quality of care, as well as organizational efficiency and effectiveness. Additionally, job satisfaction ensures the sustainability of health care professionals in the health care systems. (8)

Dissatisfied health care providers are more likely to be inefficient and to provide poor quality care, and sometimes may react irrationally. All these will lead to unnecessary costs on health institutions (9),

A number of studies done in different parts of the world, on job satisfaction have focused on the general aspects of job satisfaction and motivation and not on actual determinants of job satisfaction. (10)

This study has great significance in finding out the problems of nurses, residents and ED physicians and suggest by solving these problems will create healthy working environment with positive interpersonal relationship and enables high quality and quantity service delivery.

Also the result may have great significance for policy makers to solve the problem. The other significance of study will be for health officials and study participants to plan how to attain the right and discipline of nurses, residents and ED physicians for the job and finally the data will be used for other studies who want to assess other working area and regions as well.

1.4 OBJECTIVES OF THE STUDY

1.4.1 GENERAL OBJECTIVES:

- ✓ To compare job satisfaction among nurses, residents and specialist staff working in adult emergency department (ED) of Tikur Anbessa Hospital. From April to July 2019.

1.4.2 SPECIFIC OBJECTIVES

- ✓ To analyze the relationship of overall job satisfaction with demographic variables.
- ✓ To analyze the relationship of overall job satisfaction with professional characteristics of these personnel.

CHAPTER TWO:LITERATURE REVIEW

As high occupational satisfaction directly reflects work gratification, this will then directly increase the satisfaction of patients those apply to the emergency department of the hospital. Making the emergency department more functional in the health system leads to the formation of an ordered and more compatible sub-system (11)

Everywhere around the world emergency departments are the most difficult to administer hospital services. In the emergency ward, the patient is in communication with each type of personnel. The patient's satisfaction of the service received is based on mutual relationship with the personnel offering these services. The personnel's motivation and desire determines the quality of these relationships. (12).

The level of job satisfaction across different groups may not be consistent, but could be related to a number of variables. Therefore, Factors affecting the performance of nurses and physicians negatively were identified in Africa such as; lack of recognition of employees who are performing well, quality performance outcomes and an absence of a formal Performance appraisal system and poor working conditions (13)

Improving the productivity and performance of health care workers in order to enhance efficiency in health interventions is a major challenge for African countries. Human resources for health (clinical and non-clinical) staff are paramount as staff is the most important issue of health systems. Performance of health care organizations depends on the knowledge, skills and motivation of individual employees. Employers should provide working conditions which support the performance of employees. (14)

In Ethiopia related categories of study were not found; but there are researches done assessing job satisfaction and associated factors of nurse working in emergency department of different hospitals in Addis Ababa.

According to a descriptive, cross-sectional study done in an ED in Barcelona (Spain) in 2016 which was done to compare level of job satisfaction among nurses, physicians and administrative, it was found that administrative were more satisfied than physician and nurses ($p < 0.001$). Letting the administrative alone and assessing the overall job satisfaction of the health professionals (nurses and physicians) more individuals were dissatisfied (42[56.8%]) than satisfied (32[43.2%]). From 22 physicians thirteen (59%) reported satisfied were as only 15(28.8%) nurses out of fifty two were satisfied. On determining which factors were related to overall job satisfaction, the only significant finding was that staff rotating among the different acuity levels were more satisfied than those not rotating (65.6% vs. 42.9%; $p < 0.049$).

Based on cross sectional study that was conducted from January, 2011 to August, 2012 in Tehran, Iran to assess job satisfaction of emergency medicine residents and Specialists which included 143 residents and 67 emergency medicine specialists the overall satisfaction in specialists and residents was 50% and 42%, respectively ($P < 0.05$). Based on the findings of this study, although both residents and specialist satisfaction rate were at a moderate level, it seems that specialists were more satisfied with their job in comparison to residents. Factors related to the overall job satisfaction include, job relationship, available facilities, monthly income and clinical aspects (work experience, employment status, working hours per week, hospital teaching status,).

The only significant difference between residents and specialists was in “clinical aspects” with a P value of 0.03. The average training background of EM in the resident training hospitals was 6 ± 2.7 years.

Another study which was a cross sectional quantitative descriptive study on professional nurses working at ED at the two public hospitals (AaBET, ALERT hospitals) in Addis Ababa. From December 2016 to June 2017 showed that majority of respondents; 90 (66.67%) were reflected dissatisfaction on their job while others; 45(33.33%) were satisfied due to different factors. Regarding the overall job satisfaction; 25.19 % satisfied and 74.81% dissatisfied on their income related issues, 78.52 % satisfied, and 21.48 % dissatisfied on their working environment related issues and 67.41% and 32.59 % dissatisfied on administrative matters in their hospitals.

CHAPTER THREE: METHODS

3.1 STUDY AREA AND PERIOD

Tikur Anbessa Specialized Hospital is the largest, ~800-bed, teaching hospital for Addis Ababa University, School of Medicine in Ethiopia which is visited by approximately 370,000- 400,000 patients a year from which around 80,000 patients goes to emergency department and there are 8 emergency specialists, 26 emergency residents, 58 nurses and 10-15 attaching residents coming from different departments every month.

The Adult Emergency room comprised of 4 compartments: Resuscitation, Orange, Yellow and green areas. There are 7 beds for resuscitation (2 beds for CPR), 12 beds for Orange, 10 beds for Yellow and Green each. In addition there are 24 spine boards available that are used when run out of beds in casualties. All patients with age ≥ 13 are seen in the adult emergency department. It was conducted from April to July, 2019 (this duration was chosen because the maximum staff were available at working times)

3.2 STUDY DESIGN

A descriptive cross-sectional study was conducted from April 2019 to July 2019 G.C.

3.3 POPULATION

3.3.1 SOURCE POPULATION

All staff working at Tikur Anbessa Specialized Hospital.

3.3.2 STUDY POPULATION

The study population comprises all staff working at TASH Adult Emergency department (nurses, residents, specialists).

3.4 INCLUSION AND EXCLUSION CRITERIA

3.4.1 INCLUSION CRITERIA

All nurses, residents and specialists found on their regular working time during the study period in emergency department of TASH, volunteer to fill the questionnaire were included to the study.

3.4.2 EXCLUSION CRITERIA

All nurses, residents and ED physicians who were not present on their regular working time due to annual vacation or illness and those who were not volunteer to participate in the study during data collection period in adult emergency department of TASH were excluded from the study.

3.5 STUDY VARIABLES

3.5.1 INDEPENDENT VARIABLES:

- ✓ Age
- ✓ Gender
- ✓ Marital status
- ✓ Educational level
- ✓ Work experience in ED
- ✓ Monthly income
- ✓ Means of Transportation
- ✓ Distance from home

3.5.1 DEPENDENT VARIABLES:

- ✓ Job satisfaction

3.6 SAMPLE SIZE AND SAMPLING

The sample size of this study was all Tikur Anbessa Specialized Hospital adult emergency department staff. This include total of 92 staff (58 nurses, 25 residents and 8 specialists).

Random sampling was used as a sampling technique

3.7 DATA COLLECTION PROCEESS AND MEASURMENT

3.7.1 PEMISSION TO PROCEED

Ethical clearance was obtained from Addis Ababa University, College of health sciences and department of Emergency Medicine and critical care and permission was obtained to proceed with data collection. Informed consent was obtained from each participant prior to enrollment; the participants were checked a box indicating willingness to participate in the study. It was clearly stated in a written form that participation was not obligatory and that there were no harm in participating or refusing to participate.

3.7.2 OPERATIONAL DEFINITION

Pooled mean (grand mean):-is the mean of the means of several subsamples as long as the subsamples have the same number of data points.

Font-Rojas questionnaire-is a standardized and validated job satisfaction questionnaire used in the Tecumseh Community Health Study in 1988 and validated on 1994.

Satisfied-Font-Rojas job satisfaction score of ≤ 3

3.7.3 DATA COLLECTION

To assess the level of job satisfaction we used Modified Font-Rojas questionnaire. The original Font-Rojas questionnaire, a version derived from a tool used in the Tecumseh Community Health Study in (15)1988, was made up of 24 questions grouped into nine different dimensions related to job satisfaction. It was subsequently validated in 1994(16). In 2006, the questionnaire was revised, and two new questions were added and grouped into a new dimension (17). This extended questionnaire is able to explain 61.81% of the variance of job satisfaction, and has an internal consistency of 0.791. All questions are assessed by Likert scale from highly agree (1) to highly disagree (5).

The score obtained in each dimension is equivalent to the addition of the scores of the questions it is composed of, divided by the number of questions. The overall job satisfaction is obtained

from the addition of the scores of the all responses divided by the number of questions. The result theoretically ranges from 1 to 5 points, and 3 is the cut-off point. Thus, staff scoring equal or less than 3 are considered “satisfied”, while those scoring greater than 3 are considered “dissatisfied”.

In this study 49 questions grouped in 5 dimensions each having 12, 10,7,10 and10 questionsrespectively is used.

All the results were considered statistically significant with a p value <0.05. The statistical analyses were performed with the statistical package SPSS version 21.

3.7.4 DATA QUALITY CONTROL

As the data are collected by the data collectors, completeness and validity is checked meanwhile, by the principal investigator.

3.7.5 DATA ANALYSIS

The following variables of each participant were collected: age, gender, current marital status (single, married/stable partner, separated/divorced, widow/widower), distance in kilometers from home to the hospital, means of transportation used (public, own car, on foot), years working in the ED, profession(educational level)(specialists, nurses and residents staff), type of employment (Permanent employee, Contract employee, Part time employee and; For post graduate class from other Hospital). Demographic and professional quantitativevariables are expressed as mean and standard deviation, while categorical variables as absolute values and percentages.

To compare the three study groups the Student’s t test was used. Chi square was used for categorical data. If the number of values calculated was less than five, the Fisher exact test was used. To compare the three study groups in the Modified Font-Roja questionnaire the one-way ANOVA test was used.

To determine possible common factors associated with the over-all job satisfaction, univariate analyses was performed. The categorical independent variables with more than two categories were converted into binary variables with the aim of not having categories with few individuals. Statistically significant independent variables <0.10 in the univariate analysis were included in the multiple logistic regression analysis. All the results were considered statistically significant with a p value <0.05. The statistical analyses were performed with the statistical package SPSS v 21.

3.8 DISSEMINATION OF THE RESULT

Since the report from this study will be expected to be useful for all concerned bodies who want to develop policies, and implementation of effective job satisfaction it will be disseminated through Hospital administrator and Addis Ababa University stake holders, so as to improve the nurses, residents and specialists job satisfaction and the quality of patient care at emergency department.

CHAPTER FOUR: RESULTS

A total of 84(91.3%) individuals answered the questionnaire: 54(93%) nurses; 25(96%) residents and 5(62.5%) of the specialists. Of this respondents 48(57.1%) were males and 36(42.9%) of them were females. 82(97.7%) of the participants are below 40 years of age.

Regarding marital status of the respondents 60.7% are single. The demographic and professional characteristics are available in the table below.

From 25 residents who were participated in this study 18(72%) reported being satisfied on the other hand 22(40.7%) nurses and 3(60%) of specialists reported satisfied ($p=0.41$).it is shown figure 1.below.

The overall job satisfaction is scored as 3.35 ± 1.1 (pooled mean or Grand mean) regarding the three study groups it is found that residents are more satisfied than nurses and specialists 3.31 ± 1 Vs 3.36 ± 1 ($p<0.05$) and 3.34 ± 1 ($p=0.41$) respectively. The difference among the 3 study groups were greater when evaluating the 5 dimensions (49 questions).Thus, nurses compared to residents and specialists are dissatisfied regarding;equipment and tools at the work place ($p<0.05$), suitability and interest in the job ($p<0.05$); selection criteria for the training program ($p<0.001$) and opportunity provided to impart the knowledge secured during the training.

Thirty seven (44%) individuals reported being satisfied with their job (overall job satisfaction ≤ 3).Significant variables from the univariate analysis were included in the multivariate analysis. The only variables remaining in the model were educational level :(OR2.33 [95%CI 0.462–4.19]; $p < 0.032$), distance from home (OR 0.422 [95%CI 0.213–0.631]; $p < 0.046$) and monthly income (OR0.79 [95%CI 0.25–1.33]; $p < 0.012$).

The multivariate analysis stated above showed that educational level (being a nurse), distance from home (the longer the distance) and monthly income (the lower the income) is associated with a negative job satisfaction.

Table 1 shows Baseline demographic and professional characteristics of the three study group, at TASH ED from April to July 2019

Table 1										
Base line demographic and profesional characteristics of the three study group										
		All(n=84)		Nurses(n=54)		Residents(n=25)		Specialists(n=5)		
		Freq	%	freq	%	freq	%	freq	%	
Age										
less than 30		56	66.7	32	59.3	23	92	1	20	
31-40		26	31	20	37	2	8	4	80	
41-50		2	2.4	2	3.7					
Gender										
male		48	57.1	28	51.9	19	76	1	20	
female		36	42.9	26	48.1	6	24	4	80	
Marital status (%)										
single		51	60.7	34	63	16	64	1	20	
married		30	35.7	19	35.2	8	32	3	60	
divorced		3	3.6	1	1.9	1	4	1	20	
Distance frome home %										
Less than 10km		27	32.1	10	18.5	14	56	3	60	
11 t0 15km		20	23.8	12	22.2	7	28	1	20	
16 to 20km		22	26.2	18	33.3	3	12	1	20	
greater than 21km		15	17.9	14	25.9	1	4			
Monthly income (birr)										
less than 2500		4	4.8	3	5.6					
2600-5000		30	35.7	30	55.6	1	4			
5000-10000		28	33.3	19	35.2	5	36			
greater than 10000		22	26.2	2	3.7	15	60	5	100	
Means of transportation %										
public		66	78.6	47	87	17	68	2	40	
own car		8	9.5	2	3.7	3	12	3	60	
on foot		10	11.9	5	9.3	5	20		0	
years in the ED (years) %										
less than 5 years		57	67.9	29	53.7	25	100	5	100	
6 to 20 yrs		26	31	24	44.4					
greater than 21yrs		1	1.2	1	1.9					
Type of employment %										
permanent		67	79.8	54	100	8	32	5	100	
For post graduate clā		17	20.2				68			

Table 2.comparison of demographic and professional variables, at TASH ED from April to July 2019

table 2			
Comparison of demographic and professional variables after grouping all the personnel to as satisfied or not satisfied			
	ALL(84)		
	SATISFIED(n=37)	DISSATISFIED(n=47)	p value
Age			0.5
less than or =30	31	26	
greater than 31	10	17	
Gender			0.23
male	29	15	
female	18	19	
Eductional Level			0.043
Nurses	20	34	
physicians	17	13	
Marita status			0.25
unmerried	34	20	
merried	20	13	
Distance from home			0.04
less than or =15kms	15	21	
greater than 15kms	12	36	
Monthly income(birr)			0.02
less than 5000	10	24	
greater than or=5000	19	31	
Means of transportation			0.038
public	26	40	
non public	10	8	
Years in the ED (years)			0.37
less than or =5	40	18	
greater than 5	10	16	
Type of Employment			0.08
permanent	36	31	
For pos graduate class	11	6	

Table 3 comparing the overall job satisfaction among the three study groups at TASH ED from April to July 2019.

Table 3											
Comparing the overall job satisfaction among the three study groups with modified Font-Roja questionnaire using ANOVA test											
				ANOVA	N vs R	N vs S	R vs S				
Modified Font-Roja Questionair mean±SD				ALL(n=84)	Nurses(n=54)	Residents(R=25)	Specialists(S=5)	P	P	P	P
1	Nature of work			2.75±1	2.71±1.1	2.76±1.25	3.03±1	0.123	0.83	0.0356	0.553
2	Interpersonal relationship			2.91±1	2.95±1	2.77±1.12	3.26±0.9	0.872	0.35	0.329	0.219
3	Payment and allowance			3.85±1	3.72±0.9	4.1±1	4.03±1	0.041	0.047	0.412	0.831
4	Working Environment			3.98±1	3.8±1	4.2±1	3.5±1.25	0.03	0.049	0.318	0.059
5	Training			3.49±1.2	3.74±1	3±1.13	3.22±1.22	0.002	0.001	0.018	0.559
Overall job satisfaction				3.35±1.1	3.36±1	3.31±1	3.34±1.2	0.021	0.032	0.231	0.411

Table 4 shows variables associated with overall job satisfaction at TASH ED from April to July 2019.

Table 4					
Multivariate analysis showing the variables associated with overall job satisfaction of all the professionals included in the study					
	variables included	multivariate analysis		Odds ratio (95%CI)	P value
		β coefficient			
	Educational level	-0.962		2.326(0.462-4.19)	0.032
	Distance from home	-1.272		0.422(0.213-0.631)	0.046
	Monthly income	-0.853		0.79(0.25-1.33)	0.012

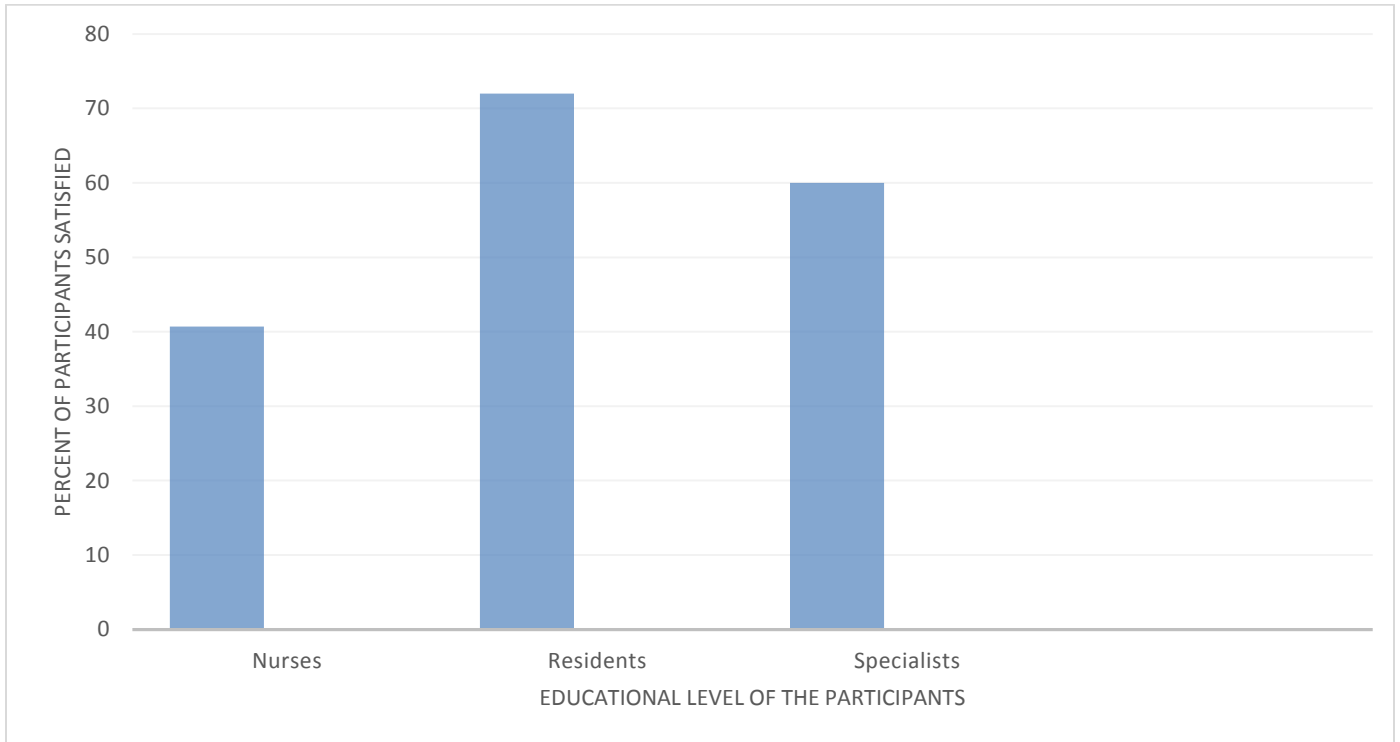


Figure 1 shows the percent of participant's job satisfaction at TASH ED from April to July 2019

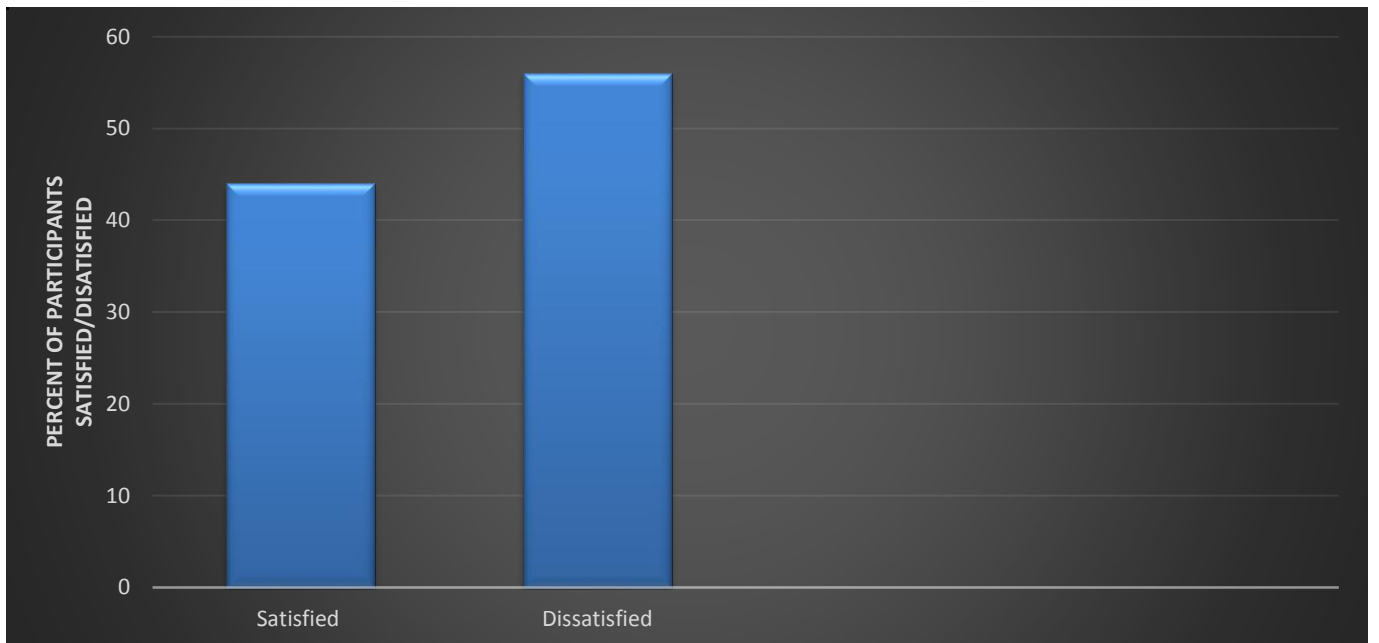


Figure 2 shows the level of jobsatisfaction, at TASH ED from April to July 2019

CHAPTER FIVE: DISCUSSION

This study showed that the overall job satisfaction of an ED health professionals at Tikur Anbessa Specialized Hospital is low. More individuals were dissatisfied 47(56%) than 37(44%) satisfied. On determining which factors were related to overall job satisfaction significant findings were associated with educational level ($p=0.032$), distance from home ($p=0.046$) and monthly income($P=0.012$).it also found that residents were more satisfied than nurses and specialists with satisfaction score of 3.31 ± 1 Vs 3.36 ± 1 ($p<0.05$) and 3.34 ± 1 ($p=0.41$) respectively.

Grouping the professionals in to nurses and physicians (residents and specialists) only 20(37%) of the nurses reported satisfied whereas 18(56.7%) of the physician were satisfied $p=0.043$. working environment is the only significant factor found related to the nurses dissatisfaction when compared with physicians.

When we compared with similar study done in Barcelona (Spain) overall job satisfaction was similar (56.8%) dissatisfied.in this study it showed that physicians are more satisfied (59%) than nurses (28.8%) but unlike the present study the only significant factor related to the satisfaction difference was found to be rotating among the different acuity levels. Those who were rotating among the different acuity level were more satisfied than those not rotating (65.6% vs. 42.9%; $p< 0.049$).

Even if similar parameters were used in this two studies there was no significant relation between job satisfaction and educational level, distance from home and monthly income in Barcelona ED nurses and physicians. This might be related with adequate payment, allowance for transportation and good working environmentwere available in Barcelona.

On a cross sectional study that was conducted in Tehran, Iran, comparing ER residents and specialist, it was found that specialists were more satisfied(50%) than residents(42%) respectively($p<0.05$).in our case it was found that residents were more satisfied(72%) than specialists(60%)respectively($p=0.41$) even if it was not significant. In this study work experience, employment status, working hours per week, hospital teaching status were factors related to the difference in satisfaction in the two study groups whereas in the present study working environment, monthly income and educational status were related to job dissatisfaction. The ER resident-training background of this two hospitals was similar (9 years in TASH ER and 8.7years in Teheran) respectively.

Another study which was a cross sectional quantitative descriptive study on professional nurses working at ED at the two public hospitals (AaBET, ALERT) in Addis Ababa, showed that majority of respondents; 90 (66.67%) were reflected dissatisfaction on their job while others; 45(33.33%) were satisfied. In the present study 34(63%) of the nurse were dissatisfied and 20(37%) were reported as satisfied. Factors associated with the overall job satisfaction of the nurses in the two studies were similar but the magnitude of satisfaction was different. Income related (74.8% vs 88%), working environment (21.4% Vs 62.3%) were dissatisfied at AaBET/ALERT and the present study respectively

In this study it is found that the inter-personal relationships between both co-workers and superiors received the highest scores (2.99 ± 0.9). This emphasizes the importance of personal relationships in the workplace as a protective factor against stress and professional burnout.

Comparing with all these studies the level of satisfaction of specialists is lower in the current study, looking all the parameters compared the number of specialists in our set up is significantly lower, this might be one factor contributing the low satisfaction score of the specialists

CHAPTER SIX

6 LIMITATIONS, CONCLUSION AND RECOMMENDATION

6.1 LIMITATIONS

This study has some limitations. First even if percentage of participation was high, not all the professionals in the ED were included. This suggests that if the responders were those who were more motivated, the grade of satisfaction might be different from what was found.

Secondly the scarcity of previous studies has limited the interpretation of my results.

Third when analyzing the data in the univariate and multivariate analysis, the overall job satisfaction was used as a categorical variable (satisfied/dissatisfied) which makes it low level of measurement.

Lastly, only one ED was included which, together with the lack of previous studies, makes it difficult to generalize the results in terms of external validity.

6.2 CONCLUSION

The findings of this study highlight that job satisfaction of ED healthcare professionals as a whole is low, being nurse, long distance from the hospital and low monthly income are factors associated with low job satisfaction.

Interpersonal relationships with both coworkers and superiors are protective factor against stress and professional burnout.

6.3 RECOMMENDATIONS

The following recommendations can be made based on the findings of the research:

There is a gap between the nurses, residents and specialists salary and current economic situation of the country that lead most of the professionals to dissatisfaction, so the stakeholder and health institutions should improve the nurses and physicians salary even if some salary and tax modification as a nation done recently.

The health institution should set a system of fair hazard allowance and an appropriate duty payment for ED nurses and physicians.

There is a highly dissatisfaction on training opportunity; especially from the nurses side. So the health institution must facilitate short term trainings and other upgrading courses to increase the knowledge and capacity of nurses and sub-specialty training should be started in all emergency medicine subspecialties.

Job dissatisfaction of this health personnel is highly reflected on patients' dissatisfaction as well as system of management, supervision and feedback. Therefore, a system should be set up for participation of this professionals in order to improve the conditions.

The present study which is the first in our country assessing the level of job satisfaction among nurses, residents and specialists of ED has found that more than 50 percent of the health care personnel were dissatisfied. It is statistically significant and it should be taken into account when designing strategies to correct and prevent dissatisfaction

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ANNEXES

ANNEX I

ADDIS ABABA UNIVERSITY COLLAGE OF HEALTH SCIENCE DEPARTMENT OF EMERGENCY MEDICINE

INFORMED CONSENT

Hello, my Name is Berhanu Tesfaye, a third year EMEGENCY and CRITICAL CARE MEDICINE resident at TIKUR AMBESSA SPECIALIZED HOSPITAL. I'm here to collect information for a research study that will be carried out to compare **Job satisfaction among emergency medicine staff** (nurses, residents and specialists) of TIKUR AMBESSA ADULT EMERGENCY. This study is being done by a researcher supported by AAU, School of Medicine.

You are selected for this study because you are working as a staff at Adult Emergency of Tikur Ambessa Specialized Hospital and with a hope you will cooperate with me.

I'm kindly requesting you to answer the questions that I have prepared for you which will take 5-10 minutes.

All the information that you are going to deliver is completely confidential and will be coded, only the principal investigator will have access to the data.

If you need any further information about the study or if there is anything that is not clear please contact me, email: berhanutesfaye88@gmail.com or with phone 251911333266

Would you agree to participate?

1 YES 2 NO

ANNEX II

QUESTIONNAIR

Please read all the questions carefully. The survey has been designed to facilitate easy answering. Answer requires either a or to indicate your appropriate responses. All Answers are confidential. Only the researcher sees and processes the questionnaire.

Part I Demographic and Professional questions.

no	Demographic data
1	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
2	Age <input type="checkbox"/> Less than 30 <input type="checkbox"/> 31-40 <input type="checkbox"/> 41-50 <input type="checkbox"/> Above 50
3	Educational Level <input type="checkbox"/> nurse <input type="checkbox"/> resident <input type="checkbox"/> specialist
4	Category of Employee <input type="checkbox"/> Permanent employee <input type="checkbox"/> Contract employee <input type="checkbox"/> Part time employee <input type="checkbox"/> For post graduate class from other Hospital
5	distance from home <input type="checkbox"/> less than 10km <input type="checkbox"/> 10-15 kms <input type="checkbox"/> 15-20kms <input type="checkbox"/> greater than 20 kms
6	means of transportation <input type="checkbox"/> public <input type="checkbox"/> own car <input type="checkbox"/> on foot
7	Marital status <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed
8	Monthly Income level (in birr) <input type="checkbox"/> Less than 2500 <input type="checkbox"/> 2500 to 5000 <input type="checkbox"/> 5000 to 10000 <input type="checkbox"/> Above 10000
9	Work Experience <input type="checkbox"/> Less than 5years <input type="checkbox"/> 5 to 20 years <input type="checkbox"/> Above 20 years

Part II Modified Font-Rojas job satisfaction questions

NATURE OF WORK

Where 1=Highly Satisfied 2=Satisfied 3=Neutral 4=Dissatisfied 5=Highly Dissatisfied

		1	2	3	4	5
1	Suitability and Interest in the Job					
2	Ability to improve skill and knowledge from my job					
3	Ability to command dignity and respect from the job					
4	Ability to do the best of my work					
5	Ability to live a happy home life with realization of aspirations					
6	Provision of required information for doing the work					
7	Requirement of physical efforts and previous experience to do my job					
8	Encouragement given for self-thinking while at work					
9	Importance given to my ideas to do things better					
10	Communication of information about what is going on					
11	Respect and encouragement given for my efforts					
12	Attachment towards my existing job					

INTER- PERSONAL RELATIONSHIP

Where 1=Highly Satisfied 2=Satisfied 3=Neutral 4=Dissatisfied 5=Highly Dissatisfied

no	statement	1	2	3	4	5
1	The trust imposed on me by my superiors					
2	Trust in my superiors for their encouragement					
3	Mutual Co-operation among people in the working environment.					
4	Care Shown by the superior in learning my job					
5	Way of listening to the suggestions made by the staff					
6	Free discussion between the superiors and other staff.					
7	Care taken in the appreciation of good work done					
8	Non-threatening way of communicating the weaknesses of the staff members.					
9	Free of expression of problems in free and informal atmosphere					
10	Encouragement given by seniors in experimenting the new methods of doing my work					

PAYMENT AND ALLOWANCES

Where 1=Highly Satisfied 2=Satisfied 3=Neutral 4=Dissatisfied 5=Highly Dissatisfied

no	statement	1	2	3	4	5
1	I get decent income for the job I perform					
2	Sufficiency of income to meet family expenses					
3	Availability of scope for schemes of financial rewards					
4	Availability of scope for schemes of non-financial rewards					
5	Clarity and ability to understand the pay and allowance system followed by the management					
6	Clarity and ability to understand the incentive system followed by the management					
7	Method of distinction between the best and less performers					

WORK ENVIRONMENT

Where 1=Highly Satisfied 2=Satisfied 3=Neutral 4=Dissatisfied 5=Highly Dissatisfied

no	statement	1	2	3	4	5
1	Availability of pleasant physical environment					
2	Provision of lighting and ventilation facilities at the work place					
3	Adequacy of working (floor) area to work efficiently					
4	Comfort ability of the working hours					
5	Efficiency of the equipment and tools at the work place					
6	Implementation of safety norms in the working area.					
7	Provision of safety appliances at work place					
8	Comfort ability to work under the existing environment					
9	Provision of sanitary facilities available					
10	Functioning of the canteen and effects to prevent distraction in the working environment.					

TRAININWhere 1=Highly Satisfied 2=Satisfied 3=Neutral 4=Dissatisfied
5=Highly Dissatisfied

No	statement	1	2	3	4	5
1	Sufficiency of imparting training program by the Hospital					
2	Usefulness of the training to acquire knowledge and skill					
3	Sufficiency of the duration of the training program					
4	Selection criteria followed for imparting training program					
5	Competence and qualification of the trainees					
6	Encouragement to participate in the external training courses					
7	Organization of the training program					
8	Opportunity provided to implement the knowledge secured during training					
9	Seriousness on the outcome of the training program					
10	Opportunity provided to implement new methods and apply					